

Assistant Professor of Orthopaedics Division of Sports Medicine Tel: (646)501-7122

Anterior and Posterior Cruciate Ligament Combined Reconstruction Surgery Rehabilitation Program

Name:	Date:
Diagnosis: _	Date of Surgery:
Phase I (D	
 Goals 	
0	Restore full passive knee extension
0	Diminish joint swelling and pain
0	Restore patellar mobility
0	Gradually improve knee flexion
0	Re-establish quadriceps control
0	Restore independent ambulation
	perative Day 1-4
0	Brace:
	 Drop lock brace locked at 0 degrees extension with compression wrap
	Sleep in brace Advisor by the series and the series are the series and the series are the
0	Weight bearing:
_	Two crutches as tolerated (less than 50%)
0	Range of motion: • 0-45/50°
	• 0-45/50° Exercises:
0	Ankle pumps
	Quad sets
	 Straight leg raising –flexion, abduction, adduction in brace
	 Muscle stimulation to quadriceps (4 hours per day) during quad sets & straight leg raises
	 Patellar mobilizations 5-6 times daily
	 Ice and elevation every 20 minutes of each hour with knee in extension
• Posto	perative Day 5-13
0	Brace:
	 Continue use of drop lock brace locked at 0° extension during ambulation & sleep
0	Weight Bearing:
	 Two crutches –gradually increase WB to 50% by day 7; 75% by day 12
0	Range of Motion:
	■ Day 5: 0-65°
	■ Day 7: 0-70°
	■ Day 10: 0-75°
	■ Day 14: 0-90°
0	Exercises:
	Continue previous exercises
	 Continue use of muscle stimulation
	 Patellar mobilizations 5-6 times daily
	 Continue use of ice, elevation, and compression
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	Maximum Protection (Week 2-6)
• Crite	ria to Enter Phase II:

o Good quad control (ability to perform good quad set and SLR)

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- o Full passive knee extension
- o PROM 0-90°
- Good patellar mobility
- Minimal joint effusion

Goals:

- Control deleterious forces to protect grafts
- Nourish articular cartilage
- Decrease swelling
- Decreased fibrosis
- Prevent quad atrophy
- Initiate proprioceptive exercises

Week 2

- o Brace
 - Continue use of brace locked at 0° of extension
- Weight Bearing
 - As tolerated; approximately 75% body weight
- o Range of motion
 - Continue to perform passive ROM 5-6 times daily
 - Day 14: 0-90°
- Exercises
 - Continue quad sets & straight leg raises
 - Multi-angle isometrics at 60° and 40°
 - Patellar mobilizations 5-6 times daily
 - Well leg bicycle
 - Mini-squats (0-45°)
 - Continue use of muscle stimulation
 - Continue ice, elevation, and compression
 - Quadriceps isotonic 90-40°

Week 3

- Continue above mentioned exercises
- o ROM: 0-90°
- Continue use of 2 crutches 75-80% body weight

Week 4

- o Brace
 - Continue use of brace locked at 0° degrees extension
 - Discontinue sleeping in brace
- Weight bearing
 - Progress to weight bearing as tolerated with 1 crutch
- Range of Motion
 - AROM, AAROM, PROM: 0-90/100°
- Exercises
 - Weight shifts
 - Mini-squats (0-45°)
 - Quadriceps isotonic 90-40°
 - Light pool exercises and walking
 - Initiate bicycle for ROM & endurance
 - Begin leg press 60-0° (light weight)
 - Proprioception/balance drills

Week 5-6

o Discontinue use of crutches week 5-6

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- Unlock brace for ambulation week 6
- Fit for functional ACL/PCL brace
- Range of Motion
 - Week 5: 0-105°
 - Week 6: 0-115°
- Continue pool exercises
- o Initiate lateral lunges

Phase III -Moderate Protection (week 7-12)

Criteria to enter Phase III

- o PROM 0-115°
- Full weight-bearing
- Quadriceps strength > 60% contralateral side (isometric test at 60 degrees)
- Minimal to no full joint effusion
- o No joint line or patellofemoral pain

Goals

- Control forces during ambulation
- o Progress knee range of motion
- o Improve lower extremity strength
- o Enhance proprioception, balance, and neuromuscular control
- o Improve muscular endurance
- Restore limb confidence and function

Brace

- o Continue use of unlocked brace for ambulation –discharge week 7-8
- Range of motion
 - o AAROM/PROM: 0-125°

Exercises

- Continue previous exercises
- Initiate swimming
- Initiate lateral and front step-ups (2" step, gradually increase)
- o Progress closed kinetic chain exercises (squats 0-60°, leg press 90-0°)
- o Progress proprioceptive training

Phase IV -Controlled Activity (Week 13-16)

• Criteria to enter Phase IV:

- AROM 0-125°
- Quadriceps strength > 60-70 contralateral side (isokinetic test)
- No change in KT scores (+2 or less)
- No patellofemoral complaints
- Satisfactory clinical exam

Goals

- Protect healing grafts
- o Protect patellofemoral joint articular cartilage
- Normalize lower extremity strength
- o Enhance muscular power and endurance
- Improve neuromuscular control

Exercises

- Continue previous exercises
- Emphasis on eccentric quadriceps strengthening
- Continue closed kinetic chain mini squats, step-ups, step-downs, lateral lunges and leg presses

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- Hip abduction/adduction
- Initiate front lunges
- o Calf raises (gastroc and soleus strengthening)
- Bicycle and stairmaster for endurance
- o Initiate pool running (side shuffle, backward, forward)
- Initiate walking program
- o Initiate isokinetic exercise 100-40° (120-240°/spectrum)

Phase V - Light Activity (Month 4-6)

Criteria to enter Phase IV

- o AROM > 125°
- o Quadriceps strength 70% of contralateral side; flexion/extension ratio 70-79%
- o Minimal joint effusion
- Satisfactory clinical exam

Goals

- o Enhancement of strength, power, endurance
- Initiate functional and/or sport-specific activity
- o Prepare for return to functional activities

Exercises

- Continue strengthening exercises –emphasize quadriceps & co contraction
- o Initiate plyometric program
- Initiate running program*
- Initiate agility drills
- Initiate sport-specific training and drills

• *Criteria to initiate running program

- o Acute reconstruction may begin at 4-5 months
- Chronic reconstruction may begin at 5-6 months
 - Satisfactory clinical exam
 - Unchanged KT Test
 - Satisfactory isokinetic test
 - Quadriceps bilateral comparison (80% or greater)
 - Hamstring bilateral comparison (110% or greater)
 - Quadriceps torque/body weight ratio (55% or greater)
 - Hamstring/quadriceps ratio (70% or greater)
 - Proprioception testing 100% of contralateral side
 - Function hop test >75% of contralateral leg

Phase VI -Return to Activity Phase (Month 6-9)

• Criteria to return to activities:

- Satisfactory clinical exam
- Unchanged KT test
- Satisfactory isokinetic test
- o Proprioception testing 100% of contralateral leg
- Functional hop test > 80% of contralateral leg

Goals

- Gradual return to full-unrestricted sports
- Achieve maximal strength and endurance
- Normalize neuromuscular control
- Progress skill training

Exercises

Continue strengthening programs

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- o Continue proprioception & neuro muscular control drills
- o Continue plyometric program
- o Continue running and agility program
- o Progress sport specific training and drills
- CLINICAL FOLLOW-UPS AT 6, 12, AND 24 MONTHS POSTOPERATIVE
 - o Functional testing
 - o Clinical exam

Comments:		
Frequency: times per week	Duration: weeks	
Signature:	Date:	